

SUMMARY OF REMARKS BY
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This text is the basis of the oral remarks of the Assistant Secretary for Aging. It should be used with the understanding that some material may be added or omitted.

I want to talk to you about two powerful strategies that I believe will help all of us in the Aging Network expand the support we provide to elderly people, including the elderly Hispanic individuals we serve. Our key goal with these strategies is real world impact – increasing the numbers of elderly people who enjoy the benefits of healthy aging.

These strategies are: 1) to ensure that Hispanic elders receive and enjoy the new benefits available through the President's Medicare modernization initiatives; and 2) ensure that Hispanic elders gain access to the best and most modern community-based long-term care that is available in this country through modernization of the Older Americans Act. The Administration's modernization proposal is called Choices for Independence. I will discuss this in more detail later in these remarks.

Before we can implement any new strategies, we have to know where we are today, especially the challenges we seek to overcome with these new initiatives. As an example, we have well documented disparities in the health status of minorities, such as elder Hispanics.

Hispanic elders are having a higher incidence of certain chronic diseases, such as diabetes, heart disease, and arthritis, than the population at large. In 2004, there were 2.2 million Hispanic individuals aged 65 and over across the United States. They constituted 6% percent of all elderly people that age in the nation. By 2020, (in less than 15 years), this population will more than double, growing to 4.7 million, and will constitute almost 9 percent of the elderly population in the U.S. By 2028, Hispanic elders will become the largest elder minority population in the United States. With this forecasted growth, it is even more critical than ever before to focus on changing these health disparities.

This information builds on the Hispanic family unit and the way Hispanic families take care of their elderly family members compared with the population at large. Hispanic elders in this country are far more likely to live with a relative than other elderly people. And the difference is most pronounced for elderly women. For Hispanic women aged 65 and over, almost 80% lived with their spouse or another relative, and only 22% lived alone. Hispanic families take care of their elderly family members!

This reality of families caring for elderly loved ones is very relevant to our efforts to ensure that elderly Hispanic people are able to take advantage of the benefits of the President's Medicare Modernization Act initiative.

The new benefits offered under the Medicare Modernization Act shifted the focus of this important program from expensive medical procedures to the prevention of conditions that cause hospitalization. The President is bringing the Medicare program into 21st century with a focus on prevention and well-being, FRONT AND CENTER!

But the new drug benefit is only one part of what amounts to a fundamental redirection to Medicare. In addition to prescription drugs, Medicare's comprehensive set of preventive benefits includes screening services for: 1) Heart disease and diabetes; 2) Weak bones and glaucoma; and 3) Cancers of the colon, breast, cervix, and prostate. Medicare also offers a "Welcome to Medicare" physical exam and smoking cessation counseling for beneficiaries who have smoking-related diseases. The MMA has also authorized the development and testing of a voluntary chronic care improvement program, called Medicare Health Support, to improve the quality of care and life for people living with multiple chronic illnesses. This program will help ensure participants follow their physicians' care plans and obtain the medical care they need to reduce their health risks. By better managing and coordinating the care of these beneficiaries, the new Medicare programs will help reduce health risks, improve quality of life, and provide savings to the

program and to the beneficiaries. The immediate goal in front of us all is enrollment of elderly individuals, including our Hispanic elders. We are confident that the ultimate result of this modernization initiative is the improved health and wellbeing of elderly people.

I am also very excited about the new coalition, announced this morning, that seeks to further MMA outreach through a **Call For Action**, and I would like to take this opportunity to recognize all the organizations that have endorsed this **Call For Action**, including the National Hispanic Council on Aging (NHCOA), Asociacion Nacional Pro Personas Mayores, Interamerican College of Physicians and Surgeons (ICPS), National Association for Hispanic Elderly, National Puerto Rican Coalition (NPRC), National Hispanic Medical Association, League of United Latin American Citizens (LULAC), and the National Latina Health Network and the Medicare Rx Access Network.

The second strategy that we have launched is an initiative called Choices for Independence, the centerpiece of our proposals for the reauthorization of the Older Americans Act. Like the Medicare Modernization Initiative, our Choices Initiative is focused first on improved outcomes for the people we serve and second, on the modernization of our Network to allow us to achieve longer life, independence, and better health and wellbeing for elderly people.

The principles that underlie our initiative include: 1) Enhancing consumer control, choice and independence; 2) Increasing Flexibility for community providers and State and local programs; 3) Strengthening program performance; 4) Positioning the Older Americans Act and our Network to perform well in the future of health and long-term care; and 5) Documenting the impact of our service on consumer wellbeing and on the long-term costs of the care we provide. Choices for Independence consist of three primary components: a) Empowering Individuals to Make Informed Choices; b) Providing More Choices for High-Risk Individuals; and c) Building Prevention into Community-Living. Essentially, the key focus of the Choices for Independence Initiative is to provide consumer choice for the seniors and people with disabilities, improve health access and increase the quality of life for the elderly people, reduce health care costs and reduce the risk of institutionalization. This initiative will give consumers and their families more control over the care they receive particularly on those programs focused on interventions such as chronic disease self-management, fall prevention, exercise, and nutrition. These community-based interventions are very effective among minority elderly communities, particularly in the Hispanic/Latino elderly communities.

My colleagues at HHS, and other leaders in long-term care across the Nation stand with you and with all of us in this important work. Together, we can make an even greater impact on the health and well-being of elderly people with these two strategies. Time is running out on one of our strategies, May 15th is almost upon us, so time is of the essence. Thank you and God bless you all.